Canadian Community Health Survey

Cycle 1.1 Report 1

Smoking in Nova Scotia

March 2003

The Canadian Community Health Survey (CCHS) is a new series of health surveys being conducted by Statistics Canada. Its purpose is to provide regular and timely cross-sectional estimates of health determinants, health status, and health system utilization for 136 health regions across the country. This survey adds to Canada's capacity for in-depth analysis of health-related issues in this country. Data from the first installment of the CCHS, Cycle 1.1, was collected between May and December of 2001, and released in May 2002.

CCHS Cycle 1.1 provided a great deal of information valuable to decision and policy-makers. A general overview of Cycle 1.1 data was released by PMHI in October 2002 and is available at <http://www.gov.ns.ca/heal/downloads/cchs_dha.pdf>. This is the first of a series of reports providing an in-depth look at thematic CCHS data.

Report Highlights

- 28 per cent of Nova Scotians aged 12 and over smoke
- More men report smoking than women
- Smoking is more prevalent among young people than among adults
- 43 per cent of smokers report trying to quit in the 12 months prior to being surveyed
- 32 per cent of non-smokers report being regularly exposed to second-hand smoke
- 28 per cent of pregnant women are regularly exposed to second-hand smoke
- Smoking is not permitted in the workplace of 52 per cent of Nova Scotians

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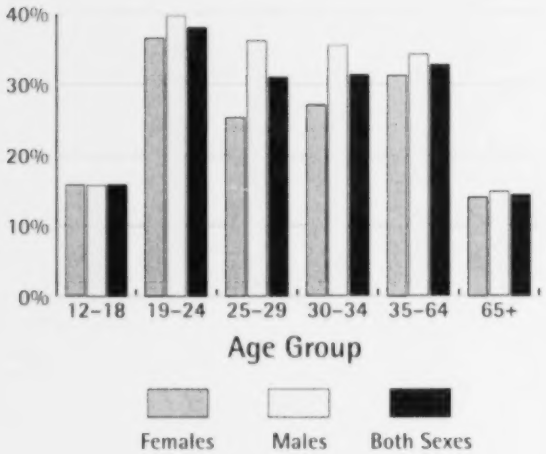
Who Is Smoking?

Twenty-eight percent of Nova Scotians aged 12 and over report that they smoke (23 per cent report being daily smokers, and 5 per cent describe themselves as occasional smokers). The rate for Canada, according to the CCHS, is 26 per cent.

Incidence of Smoking by Age and Gender



The provincial smoking rate estimated from the CCHS is slightly higher than that published by Health Canada from the Canadian Tobacco Use Monitoring Survey (CTUMS) data, which reports that 25 per cent of Nova Scotians aged 15 and over are smokers. This discrepancy is not due to the difference in the populations surveyed.[1]

According to the Nova Scotia Student Drug Use Survey, only 10 per cent of grade 7 students report having smoked in the past year, this figure jumps to 28 per cent for grade 10 students. One would suspect that the inclusion of the population aged 12 to 14 (where smoking prevalence is below the provincial average) in the CCHS would, if anything, cause its smoking rate estimates to be somewhat lower than those reported by Health Canada.

A higher proportion of males (30 per cent, compared to 26 per cent of females) **are current smokers**. The percentage of women who have never smoked (36 per cent) is higher than the percentage of men who have never smoked (28 per cent). These estimates do not vary significantly between people living in rural and urban Nova Scotia.

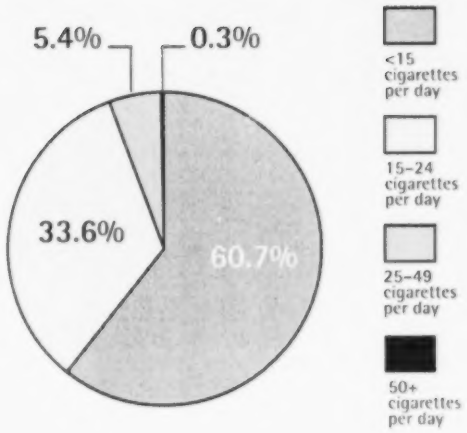
Smoking is more common among young people. When examining smoking prevalence across age groups, the rate jumps sharply from the "12–18" age group (16 per cent) to the "19–24" age group (37 per cent), suggesting that the majority of smokers take up smoking while in the latter group. There is no significant difference in the smoking rate between the ages of 25 and 64; however, the rate drops by about one half (to 15 per cent) for the "65+" age group. The trend in smoking rates across age groups is observed in both men and women. These figures are consistent with those reported by Health Canada, which show that smoking prevalence increases with age until age 45, and then declines. This would suggest that people tend to quit smoking as they enter middle age. A lower incidence of smoking among the elderly may also be due to the reduction in life expectancy caused by smoking.

How Much Are They Smoking?

The majority of **current smokers** in Nova Scotia (61 per cent) smoke less than 15 cigarettes a day. These figures are consistent with those reported by Health Canada, who report that the average Nova Scotian smoker smokes approximately 17 cigarettes a day, less than one cigarette more than the national average of just over 16 cigarettes a day.

Of those people who consider themselves to be **daily smokers**, 53 per cent of them reported smoking less than 15 cigarettes a day, while 40 per cent reported smoking between 15 and 24 cigarettes a day. Among those who reported being **occasional smokers**, the majority (63 per cent) reported smoking less than 5 cigarettes a day, when they smoke, and only 3 per cent of them reported smoking 15 or more cigarettes a day, when they smoke.

Per Cent of Smokers
(Daily and Occasional)



Quitting

Almost half of all **current smokers** in Nova Scotia (43 per cent) report having tried to quit in the past 12 months. Of those who tried to quit, 19 per cent reported using a nicotine patch as an aid, and 10 per cent reported using nicotine gum or candy. Almost all nicotine patch users (94 per cent of them) found it to be of help. Of those who used either nicotine gum or candy, 22 per cent found them to be useful.

Second-hand Smoke

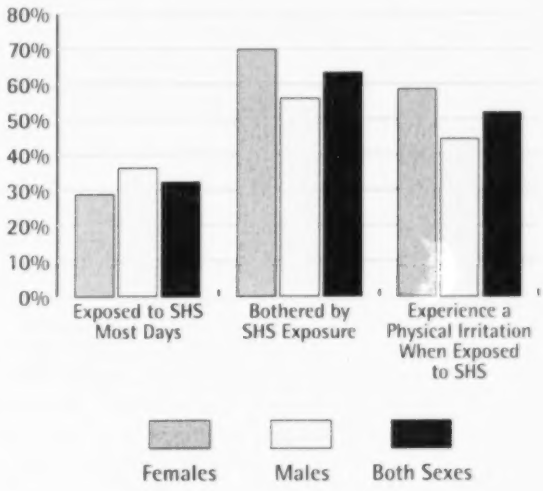
Thirty-two percent of **non-smoking Nova Scotians** are exposed to second-hand smoke "most days." Second-hand smoke exposure appears to be more prevalent among people with low incomes. A significantly higher proportion of non-smokers in the lowest income group were exposed to second-hand smoke most days than were non-smokers in the highest income group. This suggests that low income is correlated with higher levels of second-hand smoke exposure, a result consistent with previous studies examining the relationship between exposure to second-hand smoke and income level.

Thirty-six percent of **non-smoking males** are exposed to second-hand smoke most days. A significantly lower percentage (29 per cent) of **non-smoking females** are exposed to second-hand smoke most days.

Sixty-three percent of **all non-smokers** say that they are bothered by second-hand smoke, with a greater proportion of females than males indicating that they were bothered (70 per cent of females, compared to 56 per cent of males). Just over half (52 per cent) of non-smokers report suffering a physical irritation (ie. asthma) when exposed to second-hand smoke. Age has no significant effect on the probability of a person suffering a physical irritation when exposed to second-hand smoke. A higher proportion of female non-smokers suffer a physical irritation when exposed to second-hand smoke (58 per cent of females, compared to 44 per cent of males).

There is a higher percentage of second-hand smoke exposure in public places among people under 35 years of age, than among those aged 35 years and over. This suggests that the bulk of "public" second-hand smoke exposure takes place in locations frequented mainly by those in younger age groups—bars for example. Age does not seem to have an effect on whether you are exposed to second-hand smoke at home.

Second-hand Smoke Exposure



Another place where people can be frequently exposed to second-hand smoke is at work. Of those who were employed in the 12 months prior to the survey, **52 per cent of respondents stated that smoking was banned at their workplace.** This rate is comparable to the CTUMS figure reported for Nova Scotia (48 per cent), which, it should be noted, is the lowest in Canada. One third (32 per cent) of Nova Scotians said that there were some restrictions on smoking in their workplace, 16 per cent said that smoking at their workplace was completely unrestricted.

In May 2002, Nova Scotia introduced legislation banning smoking in public places where people under the age of 19 are present. It is designed to reduce the amount of second-hand smoke exposure, especially among young people. The legislation came into effect January 1, 2003.

Smoking and Pregnancy

Second-hand smoke exposure during pregnancy can lead to, among other things, low-weight babies, and pre-mature births. Twenty-eight percent of Nova Scotian women (not only non-smokers) who have given birth in the past five years were regularly exposed to second-hand smoke either during their pregnancy or during the first six months after giving birth.

A quarter (25 per cent) of Nova Scotian women who have given birth in the past five years, and who reported having ever been a smoker, reported smoking during their last pregnancy. Fifteen per cent of women who have ever been a smoker, and tried to breastfeed their last child, reported smoking while they were breastfeeding. These figures seem to suggest that smokers are less likely to breastfeed.

Other CCHS Resources

For information about smoking among First Nations People, please refer to "The Health of the Off-Reserve Aboriginal Population," a Statistics Canada publication, available at <http://www.statcan.ca/english/freepub/82-003-SIE/82-003-SIE2002003.pdf>.

A series of Statistics Canada publications based on CCHS data are available at <http://www.statcan.ca/english/freepub/82-003-SIE/free.htm>. Topics include self-perceived health status of Canadians, health status of immigrants, and mental health status of immigrants.

To read about Health Canada's objectives regarding the use of CTUMS and CCHS data, please visit <http://www.hc-sc.gc.ca/pphb-dgspsp/publicat/cdic-mcc/21-2/a_e.html>.

References

Highlights from the 2002 Nova Scotia Student Drug Use Survey can be found at <http://www.gov.ns.ca/health/downloads/2002_NSDrugHighlights.pdf>.

To see some of the reports being conducted using CTUMS data, please visit <http://www.hc-sc.gc.ca/hecs-sesc/tobacco/research/ctums/index.html>.

This document was prepared by the Performance Measurement and Health Informatics Section, Information Management Branch of the Nova Scotia Department of Health. For additional information on the data included in this report, please contact us at (902) 424-8291.

Copies of this report are available on line at <http://www.gov.ns.ca/health/downloads/cchs_smoking_2003.pdf>.

The next report in this series, "Physical Activity in Nova Scotia," is to be released in May 2003.

1 The reasons for this discrepancy are explained in "Methodological comparison between the Canadian Community Health Survey (CCHS) and the Canadian Tobacco Use Monitoring Survey (CTUMS)," a report produced by Béland et al (2002).

2 In this study, estimates of smoking rates among First Nations People were substantially higher than those for people of other origins, a result consistent with previous studies conducted in this area. However, these differences were not found to be significant. This problem is believed to be due to small sample sizes.

Canadian Community Health Survey

Cycle 1.1 Supplement to Report 1

Smoking in Nova Scotia

A Look at the DHAs

March 2003

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CCHS Cycle 1.1 provided a great deal of information valuable to decision and policy makers. A general overview of Cycle 1.1 data was released by PMHI in October 2002 and is available at <http://www.gov.ns.ca/heal/downloads/cchs_dha.pdf>. In supplement to the first of a series of reports providing an in-depth look at thematic CCHS data, some figures are presented at the DHA level here.

DHA Highlights

- Smoking rates similar across DHAs
- DHA 8 reports high rates of second-hand smoke exposure among non-smokers

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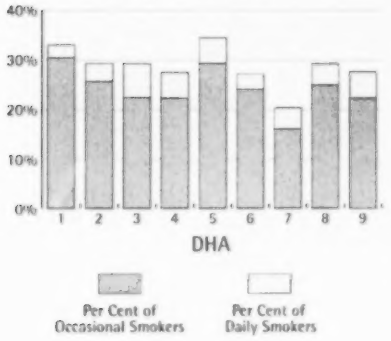
Smoking rates do not vary significantly across DHAs. The only significant difference occurs between DHAs 1 and 7, in the percentage of daily smokers. This shows the role of sample size in the determination of significance. Even though DHA 5 has a similar estimated proportion of daily smokers to that of DHA 1, DHA 1 has a significantly higher daily smoking rate than does DHA 7, and DHA 5 does not. This is due to a difference in sample size between DHAs 1 and 5; more people were sampled from DHA 1, which is reasonable, as DHA 5 is the least populated DHA.

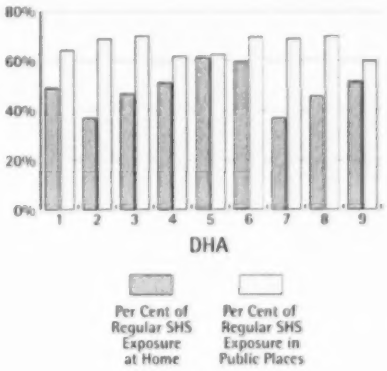
Smoking Types by DHA



The percentage of regular second-hand smoke exposure by DHA is measured as the percentage of the non-smoking population of that DHA who were exposed to second-hand smoke "most days." The percentage of regular second-hand smoke exposure at home/in public places is measured as the percentage of those non-smokers who were exposed to second-hand smoke at home/in a public place "most days."

The percentage of the non-smoking population regularly exposed to second-hand smoke in DHA 8 was significantly higher than in almost every other DHA. Only DHAs 5 and 6 had rates of second-hand smoke exposure that were not significantly lower than that of DHA 8. The rates of exposure at home/in public places did not differ significantly across DHAs.

Second-hand Smoke Exposure by DHA



This document was prepared by the Performance Measurement and Health Informatics Section, Information Management Branch of the Nova Scotia Department of Health. For additional information on the data included in this report, please contact us at (902) 424-8291.